



# EXHIBIT APPLICATION & CONTRACT AGREEMENT

**CEC/ICMC 2015 CRYO EXPO**  
June 29 - July 1, 2015  
JW Marriott Starr Pass Resort & Spa  
Tucson, Arizona USA

Completed application & contract agreement must be returned with payment by **March 31, 2015** to:  
**CEC/ICMC 2015 CRYO EXPO** ◻ c/o Centennial Conferences ◻ 908 Main Street, Suite 230 ◻ Louisville, CO 80027 USA  
Email: cecicmc@centennialconferences.com ◻ Fax: [001] 303-499-2599 ◻ Phone: [001] 303-499-2299

**EXHIBITING COMPANY (FOR SIGNAGE)** \_\_\_\_\_

**CONTACT PERSON'S FULL NAME** \_\_\_\_\_ **TITLE** \_\_\_\_\_  
*(The name and address listed here will be included in the program book. Not considered a registrant unless noted on the registration page.)*

**COMPANY NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_  
*(Dept. / Street / Suite# /P.O. Box / etc.)*

**CITY** \_\_\_\_\_ **STATE/PROVINCE** \_\_\_\_\_ **POSTAL CODE** \_\_\_\_\_ **COUNTRY** \_\_\_\_\_

**PHONE** \_\_\_\_\_ **FAX** \_\_\_\_\_  
*If outside the US and Canada, please include country code.*

**E-MAIL** \_\_\_\_\_ **WEBSITE** \_\_\_\_\_

**Do not include this contact information in the CEC/ICMC 2015 email distribution list.**

<input type="checkbox"/> <b>SINGLE BOOTH – 10' x 10' = \$2,200</b> Each booth will be equipped with 3' high fabric side-rails and a 8' high fabric back-wall and one (1) 11" x 17" ID sign. Complimentary wireless internet will be available in the Exhibit Hall. The Booth fee includes one (1) complimentary Full Conference Registration, two (2) Exhibit Hall Only Registrations and one set each of the published CEC and ICMC Conference transactions. The sets will be mailed to the contact person listed above. <input type="checkbox"/> Check here if your company does <b>not</b> wish to receive the transactions.	<input type="checkbox"/> <b>DOUBLE BOOTH – 10' x 20' = \$4,000</b> Each booth will be equipped with 3' high fabric side-rails with 8' high fabric back-wall and one (1) 11" x 17" ID Sign. Complimentary wireless internet will be available in the Exhibit hall. The Booth fee includes two (2) complimentary Full Conference Registrations, four (4) Exhibit Hall Only Registrations and two sets each of the CEC and ICMC transactions. The sets will be mailed to the contact person listed above. <input type="checkbox"/> Check here if your company wishes to receive <b>only one (1)</b> set each of the transactions. <input type="checkbox"/> Check here if your company does <b>not</b> wish to receive any transactions.
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**COMPANY DESCRIPTION:**  
Please submit your company description (no more than 100 words) with your application. The description will be posted on the CEC/ICMC 2015 website and included in the on-site Conference Program Book along with the contact information listed above. To be included in the Program Book, the description must be submitted **no later than May 11, 2015** by email to cecicmc@centennialconferences.com.

**PREFERRED BOOTH NUMBER(S):** \_\_\_\_\_

**POSITIONING ON THE SHOW FLOOR:** \_\_\_\_\_  
*If you wish to avoid assignment of space adjacent to, or across from, particular companies, please indicate above.*

**SPECIAL REQUESTS (SEE PROSPECTUS):** Does your company have special requests at the CEC/ICMC 2015 CRYO EXPO, i.e. cooling/drain water, chemical mixtures, liquid hydrogen, etc.?  **YES**  **NO** If "YES", please specify: \_\_\_\_\_

	FEES	NUMBER OF REPS.	SUBTOTAL
SINGLE BOOTH	\$2,200		
DOUBLE BOOTH	\$4,000		
ADDITIONAL EXHIBIT HALL ONLY REGISTRATION	\$150		
		<b>TOTAL*</b>	

**\*TOTAL FEE DUE AT TIME OF SUBMISSION OF THIS CONTRACT.**

**EXHIBIT APPLICATION & CONTRACT AGREEMENT:**  
We would like to reserve booth space for the CEC/ICMC 2015 CRYO EXPO, June 29 – July 1, 2015. We agree to abide by the Terms and Conditions governing exhibits set forth in the Exhibitor Application & Contract Agreement and Rules & Regulations, which are made a part of the Exhibit Prospectus, and to all conditions under which exhibit space at the JW Marriott Starr Pass Resort & Spa is leased to the 2015 CEC/ICMC Conference.

**AUTHORIZED APPLICANTS SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

## PAYMENT INFORMATION FORM

- Contracts must be received by **March 31, 2015** and must include full payment.
- Contracts will be date stamped and handled on a first-come, first-served basis as payment is made in full.
- Booth assignments will be posted on the CEC/ICMC website on **April 6, 2015**.

### Contract agreement, payment & registrant page must be sent to:

CEC/ICMC 2015  
c/o Centennial Conferences  
908 Main Street, Suite 230  
Louisville, CO 80027 USA  
Fax: [001] 303-499-2599  
Email: cecicmc@centennialconferences.com\*

**\*Do NOT email your credit card information!** Note: If you wish to email your forms and payment is made by credit card, provide only the card holder name, the billing zip/postal code, the card holder's signature and date below and call Centennial Conferences with the card information at **[001] 303-499-2299**.

**TOTAL PAYMENT AMOUNT:** \_\_\_\_\_

#### PLEASE SELECT FROM ONE OF THE FOLLOWING PAYMENT OPTIONS:

**CHECK NUMBER** \_\_\_\_\_

Checks must be in U.S. dollars, drawn on a U.S. bank, payable to "Cryogenic Engineering Conference, Inc.". A \$20 administrative fee will be applied for all returned checks.

**CREDIT CARD** (Please complete information below.)

- VISA  
 MasterCard  
 Discover

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Security Code: \_\_\_\_\_ Billing Zip/Postal Code: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

#### IMPORTANT CREDIT CARD INFORMATION

Credit card information will only be kept on file until two (2) weeks following the Conference and is stored securely. Credit card information will not be saved electronically and will be shredded after the conference. Credit card information will not be shared and is only available to Centennial Conference employees authorized to accept and process credit cards.

**WIRE TRANSFER**

Wire information along with an invoice will be sent to you via email. Bank wire fees will apply.

#### CANCELLATION POLICY:

If written notice of cancellation is received by **March 31, 2015**, an administrative fee of 20% of the total booth fee will be retained. Cancellations after March 31, 2015 will result in full forfeit of exhibit fee.

**THANK YOU FOR CHOOSING TO EXHIBIT AT THE CEC/ICMC 2015 CRYO EXPO!**  
**We look forward to working with you.**

## COMPLIMENTARY EXHIBITOR REGISTRATION FORM

Please make a copy of this page for Double Booth registrations.

### COMPLIMENTARY FULL CONFERENCE REGISTRATION – 1 INCLUDED WITH EACH SINGLE BOOTH

(Full conference registrations include admission to all Technical Sessions, Exhibits & Social Events.)

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

TITLE \_\_\_\_\_ COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

(Dept. / Street / Suite# / P.O. Box / etc.)

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

If outside the US and Canada, please include country and city code (as applies).

E-MAIL \_\_\_\_\_

Do not include contact information in the CEC/ICMC 2015 email distribution list.

Do not include the address, phone/fax numbers and email address in the attendees list.

### COMPLIMENTARY EXHIBIT HALL ONLY REGISTRATIONS – 2 INCLUDED WITH EACH SINGLE BOOTH

(Exhibit Hall Only personnel may staff the exhibit booth and attend the Welcome Reception, Exhibitor Reception and Refreshment Breaks. Admittance to technical sessions and the Farewell Event are not included.)

REPRESENTATIVE 1: FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

TITLE \_\_\_\_\_ COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

(Dept. / Street / Suite# / P.O. Box / etc.)

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

If outside the US and Canada, please include country and city code (as applies).

E-MAIL \_\_\_\_\_

Do not include contact information in the CEC/ICMC 2015 email distribution list.

Do not include the address, phone/fax numbers and email address in the attendees list.

REPRESENTATIVE 2: FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

TITLE \_\_\_\_\_ COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

(Dept. / Street / Suite# / P.O. Box / etc.)

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

If outside the US and Canada, please include country and city code (as applies).

E-MAIL \_\_\_\_\_

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Do not include the address, phone/fax numbers and email address in the attendees list.

## ADDITIONAL EXHIBITOR REGISTRATION FORM

### Exhibit Hall Only Registration 1 @ \$150

Exhibit Hall Only personnel may staff the exhibit booth and attend the Welcome Reception, Exhibitor Reception and Refreshment Breaks. Admittance to technical sessions and the Farewell Event **are not included** in this fee.

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

TITLE \_\_\_\_\_ COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
(Dept. / Street / Suite# / P.O. Box / etc.)

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_  
*If outside the US and Canada, please include country and city code (as applies).*

E-MAIL \_\_\_\_\_

Do not include this contact information in the CEC/ICMC 2015 email distribution list.

Do not include the address, phone/fax numbers and email address in the attendees list.

### Exhibit Hall Only Registration 2 @ \$150

Exhibit Hall Only personnel may staff the exhibit booth and attend the Welcome Reception, Exhibitor Reception and Refreshment Breaks. Admittance to technical sessions and the Farewell Event **are not included** in this fee.

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

TITLE \_\_\_\_\_ COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
(Dept. / Street / Suite# / P.O. Box / etc.)

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_  
*If outside the US and Canada, please include country and city code (as applies).*

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